

	(Requestor's Name)	
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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: TYSON'S (GARAGE TOW	ING 3 RECOVERY, IN
DOCUMENT NUMBER			,
The enclosed Articles of A			
Please return all correspon	dence concerning this mat	tter to the following:	
	TIMOTH	Name of Contact Person	·····
		Firm/ Company	
		29 S. MONR Address	
	TA	City/ State and Zip Code	FL 32309
	TYSONSREGOV. E-mail address: (to be us	ERY 1609 DYA sed for future annual report	notification)
For further information co	neerning this matter, pleas	se call:	
TIMOTHY S	O. TYSON ontact Person	at (<u>\$60</u> Area Coo	SHU-1787 de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendi Division P.O. Bo	Address nent Section t of Corporations x 6327 see, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp., " "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Check if applicable

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee, C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT John I</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	Jones .	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		CAROLYN P. HOLDEN	
Add			TALLAHASSEE, FL 3230
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach addi	g or adding additional Ar tional sheets, if necessary)	. (Be specific)	actol mere.			
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. <u>If an amen</u>	dment provides for an ex	change, reclassifi	cation, or cance	llation of issued s	shares.	
provisions (it not	s for implementing the ar applicable, indicate N/A)	<u>nendment it not c</u>	ontained in the	amenament user	<u>1:</u>	
(9 ////	appricant, material (may					
						
						
				••		

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The date of each amendment(s) a	doption:	, it other than the
date this document was signed.		
Effective date if applicable:		
 .	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requires partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were addiction was not required.	opted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the afficient for approval.	e amendment(s)
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The followed each voting group entitled to vote separately on the amend	owing statement lment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
·	(voting group)	
Dated 3/11/	22	
selecte	irector, president or other officer – if directors or officers h d, by an incorporator – if in the hands of a receiver, trustee ted fiduciary by that fiduciary)	
	TINIOTHY S. TYSON (Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	